Corporate Guarantee for Closure or Postclosure Care

Guarantee made this	(date) by	
((date)	(name of guaranteeing entity)
		, herein referred to as guarantor,
	(insert i	name of State)
		ergy and Environment Cabinet, obligee.
This guarantee is made on behalf of		
	þ	
Of		
	(business address)	
which is (delete all that do not apply)	our subsidiary/a subsidiary of	(name and address of
		(name ana adaress of common parent corporation)
		common parametry
34:080 or 401 KAR 3 5:080 to the Di Recitals 1. Guarantor meets or exceeds the	ivision of Waste Management in the land the financial test criteria and agrees to	Energy and Environment Cabinet. comply with the reporting requirements for guarantors: 100 and Section 7 of 401 KAR 35:090 or Section 7 of
2	wner or operator)	owns or operates the following hazardous
Indicate for each whether guarantee	is for closure, postclosure care, or bo	,
(EPA ID Number)	(Name and Address)	(C, PC, or B)
(EPA ID Number)	(Name and Address)	(C, PC, or B)
(EPA ID Number)	(Name and Address)	(C, PC, or B)
(EPA ID Number)	(Name and Address)	(C, PC, or B)
3. "Closure plans" and "postclose 401 KAR 35:070 for the closure and		clans maintained as required by 401 KAR 34:070 and ified above.
4. For value received from		guarantor guarantees
	(owner or opera	tor)
to the Division of Waste Managemen	t that in the event that	
		(owner or operator)
	ve facility or facilities "postclosure care" or "closure and p	postclosure care")
in accordance with the closure or post	closure plans and other permit or inte	erim status requirements whenever required to do so, 34:080 through 34:130 or 401 KAR 35:080 through
35:130, as applicable, in the name of		
	(owner	or operator)

in the amount of the current closure or postclosure cost estimates as specified in 401 KAR 34:080 through 34:130 or 401 KAR 35:080 through 35:130.

5. Guarantor agrees that if, at the end of any fiscal year before termination of this guarantee, the guarantor fails to most the financial text pritario guarantee shall send within (00) days by contified mail notice to the Division of Western

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s of the state of

(owner or operator)

13. Guarantor expressly waives notice of acceptance of	this guarantee by the Division of Waste Management or by
	. Guarantor also expressly waives notice of amendments
(owner or operator)	
or modifications of the closure and/or postclosure plan and of an	mendments or modifications of the facility permits(s).
I hereby certify that the wording of this guarantee is identical to the were constituted on the date first above written.	e wording specified in 401 KAR 34:080 as such regulations
Effective Date:	
(Name of guarantor, typed)	
(Authorized signature for guarantor)	
(Name of person signing, typed)	
(Title of person signing, typed)	
(Signature of Witness or Notary Public)	
	(Seal of Notary Public)
(Date Notary Public's Commission Expires)	

DEP-6035H1, effective 2/10/94

(Note: Use of this form is required by KAR 34:080).

(Note: Attach "Letter from Chief Financial Officer (to Demonstrate Assurance of Closure or Postclosure Care), form number DEP-6035F)